232399

FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

030586	16

Prefix

SEC USE ONLY

RECEIVED

Serial

- ·	is an amendment and name has changed, and inc	icate change.)	
\$100,000,000. OF LIMITED	PARTNERSHIP INTERESTS		
Filing Under (Check box(es) that app	ly):	☐ Section 4(6) ☑ ULOE	DDOCESS!
Type of Filing: New Filing □	Amendment		1 1 0 E E E E
	A. BASIC IDENTIFICATION DATA	1	MAY 13 2003
1. Enter the information requested ab	out the issuer		
	an amendment and name has changed, and indicate	ate change.)	THOMSON FINANCIAL
INSIGHT CAPITAL MANAG	EMENT, L.P.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including	Area Code)
201 STEELE STREET, SUI	TE 2A, DENVER, CO 80206	(303) 333-8600	
Address of Principal Business Operation	ons (Number and Street, City, State, Zip Code)	Telephone Number (Including	Area Code)
(if different from Executive Offices)	[SAME]	[SAME]	
Brief Description of Business			
LIM	ITED PARTNERSHIP SECURITIES INVESTME	· · · · · · · · · · · · · · · · · · ·	}
	MANAGED BY KIMBALL T. KISTLER,	INC.	•
Type of Business Organization			
	limited partnership, already formed	other (please specify):	
□ business trust □	l limited partnership, to be formed		
	Month Year		
Actual or Estimated Date of Incorpor	ation or Organization: 0 2 0 3	■ Actual □ Estimated	
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter U.S. Postal Service abbi		
	CN for Canada; FN for other foreign jun	risdiction) DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the calm for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Promoter ☐ Beneficial Owner ☑ General and/or ☐ Executive Officer ☐ Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) KIMBALI. T. KISTLER, INC. Business or Residence Address (Number and Street, City, State, Zip Code) 201 STEELE STREET, SUITE 2A, DENVER, CO 80206 ■ Beneficial Owner **⊠** Promoter ☐ General and/or Check Box(es) that Apply: * OF CORPORATE GENERAL PARTNER Managing Partner Full Name (Last name first, if individual) KISTLER, KIMBALL T. Business or Residence Address (Number and Street, City, State, Zip Code) 7897 SOUTH FOREST STREET, CENTENNIAL, CO 80122 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner □ Director Check Box(es) that Apply: □ Promoter ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. 11	NFORMA	TION ABO	OUT OFF	ERING				Yes No
1. Has the	e issuer sold,	or do	es the issu	er intend	to sell, to	non-accred	lited invest	ors in this	offering?			. 🗆 🗷
2 377	- 41				in Append			-				a 100 000
2. What is	s the minimu	ım inve	estment tha	at will be	accepted I	rom any ir	idividual?					\$ 100,000. Yes No
3. Does th	ne offering p	ermit j	oint owner	rship of a	single unit	:?						. 🛭 🗆
sion or to be li list the	he informatio similar remu isted is an a name of the er, you may	ineratio ssociate broke	on for solic ed person er or dealer	itation of or agent or agent or agent or	purchasers of a broker e than five	in connecti or dealer (5) person	on with sa registered s to be lis	les of secur with the S	rities in the EC and/or	offering. with a star	If a pers	es,
Full Name (Last name fi	rst, if	individual)									· · ·
Business or	Residence A	ddress	(Number a	and Street,	City, Stat	e, Zip Coo	le)					
Name of Ass	sociated Brok	cer or	Dealer									
States in Wh	nich Ferson I	Listed 1	Has Solicit	ted or Inte	ends to So	licit Purcha	sers					
(Check "A	Il States" or	check	individual	States)			• • • • • • • • • • • • • • • • • • • •					☐ All States
. ,	[AK] [A	AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN] []	IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE] [N	1V]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[\phi R]	[PA]
[RI]	[SC] [S	SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name fi	rst, if	individual)					_				
Business or	Residence A	ddress	(Number a	and Street,	City, Stat	e, Zip Coo	le)					
Name of As	sociated Brok	cer or	Dealer		•	<u> </u>						
States in Wh	nich Person I	listed	Has Solici	ted or Inte	ends to So	licit Purch:	nsers	<u></u>			_	
	All States" or						13013					☐ All States
		AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	
		IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
		1V]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	_
-		SD]	[NT]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	
Full Name (:	<u></u>	<u>.</u>			()
Business or	Residence A	ddress	(Number a	and Street,	City, Stat	e, Zip Coo	le)					
Name of As	sociated Brok	ker or	Dealer									
States in Wh	nich Person I	Listed	Has Solici	ted or Inte	ends to So	licit Purch:	asers				_	
	all States" or]	☐ All States
,		4Z]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	
·-		IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	_
		NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
	_	SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	

	OCEEDS)F PR	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O
Amount Alread	ggregate	٨	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box. \square and indicate in the column below the amounts of the securities offered for exchange and already exchanged.
Sold	ggregate ering Price		Type of Security
s0	0	\$	Debt
\$ <u> </u>	0	\$	Equity
			□ Common □ Preferred
\$ <u> 0 </u>	0	\$	Convertible Securities (including warrants)
\$ <u> </u>	00,000,000.	\$ <u>10</u>	Partnership Interests
s <u> </u>	0	\$	Other (Specify)
\$ <u> </u>	00,000,000.	\$ <u>10</u>	Total
			Answer also in Appendix, Column 3, if filing under ULOE.
Aggregate Dollar Amoun of Purchases	Number of Investors	_	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".
\$ 0	0	\$	Accredited Investors
\$ <u> </u>	0	\$	Non-acc: edited Investors
\$ 0	0	\$	Total
			Answer also in Appendix, Column 4, if filing under ULOE.
Dollar Amoun	Type of	,	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securi- ties sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior To the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.
Sold	Security		Type of offering
\$ <u>N/A</u>	N/A	\$	Rule 505
\$N/A	N/A	\$	Regulation A
\$ <u>N/A</u>	N/A	\$	Rule 504
\$N/A	N/A	\$	Total
			a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure Is not known, furnish an estimate and check the box to the left of the estimate.
\$ <u> </u>	🗖		Transfer Agent's Fees
\$ <u> </u>	🗖		Printing and Engraving Costs
\$ <u> </u>	व		Legal Fees
	а		Accounting Fees
\$ <u> </u>	···· Ч		Accounting 1 ccs
\$ <u> </u>	1		Engineering Fees
	а		
\$ 0	🛮		Engineering Fees

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C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND	USE OF PR	OCEEDS	
b. Enter the difference between the aggregate offe tion 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer"	Part C - Question 4.a. This difference i	s the		\$ <u>100,000,000</u> .
5. Indicate below the amount of the adjusted gross pused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	ount for any purpose is not known, furniste. The total of the payments listed must of	h an equal		
and adjusted groot proceeds to the issue, see form	The response to Take a Quienen no a	Payme	cers, ors, &	Payments to Others
Salaries and fees (SEE * BELOW)			0 * S	\$ 0 *
Purchase of real estate		□ \$	0 🗆	s 0
Purchase, rental or leasing and installation of	machinery and equipment	□ \$	o d	s 0
Construction or leasing of plant buildings and		_	o 🗆	s 0
Acquisition of other businesses (including the	'	1 		·
offering that may be used in exchange for th	e assets or securities of another		o 📙	
issuer pursuant to a merger) Repayment of indebtedness		<u> </u>	0	\$ <u> </u>
	1 1			\$ <u>100,000,000.</u>
Working capital (INVESTMENT IN PARTM				
Other (specify):		□ \$	<u> </u>	\$ 0
) [• •
C. L. C. L. CEET PELOW		<u> </u>		
Column Totals (SEE * BELOW) Total Payments Listed (column totals added)			<u>v </u>	\$ <u>100,000,000.</u> *
Total Payments Listed (column totals added)	(SEE BELOW)	'	2 5 100,00k	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the quest of its staff, the information furnished by the	issuer to furnish to the U.S. Securities an	nd Exchange	Commission,	upon written re-
Issuer (Print or Type)	Signature	1	Date	
INSIGHT CAPITAL MANAGEMENT, L. P.	Kindeli THU	e~	FEBRU	ARY 3, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
KIMBALL T. KISTLER	PRESIDENT OF GENERAL	PARTNER		
* ALL PROCEEDS OF THIS OFFERING SH	ALL BE USED AS WORKING CAPITA	L AND INVE	STED IN T	HE SECURITIES
PORTFOLIO OF THE PARTNERSHIP. H	OWEVER , THE TERMS OF THE PAR	TNERSHIP'S	AGREEME	NT OF LIMITED
PARTNERSHIP PROVIDE FOR:				
(A) A CASH FEE PAYABLE TO TI	HE GENERAL PARTNER ON A	MONTHLY	BASIS IN	AN AMOUNT
EQUAL TO 1/6 OF 1% (0.167%)	OF THE BALANCES OF LIMITED P	ARTNER C	APITAL A	COUNTS; AND
(B) A PERFORMANCE-BASED PROFIT	ALLOCATION TO THE GENERAL	PARTNER	FROM T	HE ACCOUNTS
OF LIMITED PARTNERS ON A QU	UARTERLY BASIS IN AN AMOUNT	EQUAL TO	20% OF	NET PROFITS,
SUBJECT TO CERTAIN LOSS CAF	RRYFORWARD LIMITATIONS.			
	ATTENTION			
Intentional misstatements or omissions of	of fact constitute federal criminal	violations.	(See 18	U.S.C. 1001.)

	1 1	
	E. STATE SIGNATURE	
1. Is any party described in 17 CFR 230.252(c), of such rule?	(d), (e) or (f) presently subject to any of the disqualification provis	ions Yes No □ 🗷
See Ap	opendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes to fur Form D (17 CFR 239.500) at such times as a	nish to any state administrator of any state in which this notice is required by state law.	filed, a notice on
3. The undersigned issuer hereby undertakes to fi issuer to offerees.	urnish to the state administrators, upon written request, information	furnished by the
	er is familiar with the conditions that must be satisfied to be entitle e in which this notice is filed and understands that the issuer claim g that these conditions have been satisfied.	
The issuer has read this notification and knows the cundersigned duly authorized person.	ontents to be true and has duly caused this notice to be signed or	its behalf by the
Issuer (Print or Type) INSIGHT CAPITAL MANAGEMENT, L. P.	Signature Date Date FEBR	JARY 3, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
KIMBALL T. KISTLER	PRESIDENT OF GENERAL PARTNER	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1	2		3			4				
•	Intend to non - investors	to sell accredited in State	Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State					ication e ULOE attach ion of granted)
	(Part B -	Item 1)	(Part C - Item 1)		(Part C	2- Item 2)		(Pa	irt E -	Item 1)
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Y	es	No
AL	100	1,0	Interests	Investors	Imount	Investors	11mount			110
AK										
AZ										
AR										
CA										
СО		Х	\$100,000,000.	0	0	0	0			Х
СТ			, , , , , , , , , , , , , , , , , , , ,	-						
DE							-			
DC					 -					
FL		х	\$100,000,000.	0	0	0	0			Х
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY			<u>. </u>							
LA										
ME										
MD										
MA										
MI										
MN					!-					
MS				-						
MO										

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1	to non -	I to sell accredited in State	Type of security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C- Item 2)			Disquali fication under State ULOE (If yes, attach explanation of waiver granted) (Part E - Item 1)		
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Ye	s No	
MT										
NE										
NV					:					
NH										
NJ										
NM										
NY										
NC		3								
ND										
ОН										
OK										
OR										
PA										
RI										
sc										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										

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